FORM D



## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

1302508

OMB APPROVAL 3235-0076 OMB Number: March 15, 2009 **Expires:** Estimated average burden Hours per response: 16.00

S	SEC USE O	ONLY
Prefix	1	Serial I
D	ATE REC	EIVED

TEMPORARY FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

UNIFORM LIMITED OF	FERING EXI	EMPTION				
Name of Offering (  check if this is an amendment and name h Wexford Offshore Credit Opportunities Fund Limited	as changed, a	nd indicate chan	ge.)	CEO		
Filing Under (Check box(es) that apply): Rule 504 Rule	505 🛭 Rul	e 506 🔲 Secti	ion 4(6) 🔲 U	LOE Signion		
Type of Filing: New Filing Amendment				2.0		
A. BASI	C IDENTIFIC	CATION DATA		MAK 1 1 Z008		
1. Enter the information requested about the issuer						
Name of Issuer ( check if this is an amendment and name has cl	hanged, and in	ndicate change.)		wa <b>zinington, OS</b> IOO		
Wexford Offshore Credit Opportunities Fund Limited						
Address of Executive Offices (Number and Street, City, State, Zip Cc/o Wexford Capital LLC, 411 West Putnam Avenue, Suite 1	umber (Including Area Code) (203) 862-7000					
<del></del>				'elephone Number (Including Area Code)		
Brief Description of Business To operate as a private investment	nt exempted o	ompany				
Type of Business Organization						
☐ corporation ☐ limited partnership, alre	eady formed	other (pleas	se specify): a C	ayman Island Ampled Company		
☐ business trust ☐ limited partnership, to b	be formed					
	Month	Year		MAR 2 7 2009		
Actual or Estimated Date of Incorporation or Organization:	<u>12</u>	<u>02</u>		☐ Estimated		
Jurisdiction of Incorporation or Organization (Enter two-letter U.S. CN for Canada; FN f			or State:	THOMSON REUTERS		

GENERAL INSTRUCTIONS Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of § 230.503T.

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

	···	<del>.</del>		A DACIC IDENT	TIFICATION DATA		
					TIFICATION DATA		
2.	En	ter the information	on requested for th	e following:	•		
	o	Each promotes	r of the issuer, if th	e issuer has been organized	within the past five years;		
	0	Each beneficial of the issuer;	al owner having the	power to vote or dispose, o	or direct the vote or disposition	n of, 10% or more o	f a class of equity securities
	o	Each executive	e officer and direct	or of corporate issuers and o	of corporate general and mana	ging partners of part	nership issuers; and
	0	Each general a	and managing partr	ner of partnership issuers.			
Check	Box(e	es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
David	lson, C	Last name first, it Charles E.					· · · · · · · · · · · · · · · · · · ·
		Residence Addre		r and Street, City, State, Zip am Avenue, Greenwich, C			
		es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
	lame (L , Robe	Last name first, it ert H.					
		Residence Addre		r and Street, City, State, Zip			
		s) that Apply:	Promoter Promoter	m Avenue, Greenwich, C Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
		last name first, it Jay L.			·		
		Residence Addre		r and Street, City, State, Zip			
		cs) that Apply:	Promoter	m Avenue, Greenwich, C Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Mich	aelson	Last name first, it, Robert T.					
		Residence Addre d Capital LLC,		er and Street, City, State, Zig am Avenue, Greenwich, C			
			(Use blant	k sheet, or copy and use add	itional copies of this sheet, as	necessary.)	

SRZ-9413381.21

c													
,					B.	INFORMA	TION ABO	OUT OFFE	RING				
1.	F	Answer also	in Append	lix, Columi	n 2, if filing	g under UL	OE.		his offering			No ⊠	
2.	What is	the minim	um investr	nent that wi	ill be accep	oted from a ectors to ac	ny indiviđu	al amounts.				* 000,000	
3.	Does th	ne offering	permit join	t ownership	o of a singl	e unit	****	. *	4!4!		Ye: ⊠		aimila.
4.	remune agent o	ration for s f a broker o	olicitation or dealer re	of purchase gistered wi	ers in conn th the SEC	ection with and/or wit	sales of se h a state or	curities in t states, list	en, directly the offering the name of orth the info	. If a perso f the broker	on to be list r or dealer.	ed is an ass If more the	sociated person or an five (5)
Full Na		name first						,					-
		idence Add eet, Winch			eet, City, S	tate, Zip C	ode)			<u></u>			
		ated Broke rnational G							· <del>_</del>				
		Person List All States" o				olicit Purch	asers				<del></del>	☐ Al	l States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Na	me (Last	name first	, if individ	ıal)		<del></del>			<del></del>		_		· <del></del>
Busine	ss or Res	idence Add	lress (Num	ber and Str	eet, City, S	tate, Zip C	ode)						
Name o	of Associ	ated Broke	r or Dealer						,				
		Person List All States" o				olicit Purch	asers					☐ All	1 States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Na	me (Last	name first	, if individ	ıal)									
Busine	ss or Res	idence Add	lress (Num	ber and Stre	eet, City, S	tate, Zip C	ode)						
Name o	of Associ	ated Broke	r or Dealer										
		Person List All States" o				olicit Purch	asers					☐ All	States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is
"none" or "zero". If the transaction is an exchange offering, check this box [ ] and indicate in the columns below the amounts of
the securities offered for exchange and already exchanged.

Type of Security		Aggregate Offering Price		Amount Already Sold
Debt	. <u>\$</u>	0	<u>\$</u>	0
Equity	. \$50	00,000,000	<b>\$</b> 59,	011,150
[ X ] Common [ ] Preferred				
Convertible Securities (including warrants)	. \$	0	<u>\$</u>	0
Partnership Interests.	. <u>\$</u>	0	<u>\$</u>	0
Other (Specify )	. <u>\$</u>	0	<u>s</u>	0
Total	. \$50	000,000,000	\$59,	011,150

Answer also in Appendix, Column 3, if filing under ULOE.

Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	12	\$59,011,150
Non-accredited Investors	0	\$ 0
Total (for filing under Rule 504 only)		\$

If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.

Type of Offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$

a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	[x] <u>\$</u>
Printing and Engraving Costs	[ x ] <u>\$*</u>
Legal Fees	[x] <u>\$*</u>
Accounting Fees	[x] <u>\$*</u>
Engineering Fees	[x] <u>\$</u>
Sales Commissions (specify finders' fees separately)	[x] <u>\$</u>
Other Expenses (identify)	[x] <u>\$*</u>
Total	[x] <u>\$150,000*</u>

<sup>\*</sup>All offering and organizational expenses are estimated not to exceed \$150,000\*.

	issuer."							\$499,850,000
5.	indicate below the amount of the adjusted gross proceeds to the issuer us purposes shown. If the amount for any purpose is not known, furnish an estimate. The total of the payments listed must equal the adjusted gross C - Question 4.b above.	estimate	and	d ch	eck the box to the	e left	of the	
					Payments to Officers, Directors, & Affiliates			Payments to Others
	Salaries and fees	[	]	]	\$	[	]	\$
	Purchase of real estate	[		]	\$	[	]	\$
	Purchase, rental or leasing and installation of machinery and equipment.	[	]	]	\$	[	]	\$
	Construction or leasing of plant buildings and facilities	[	]	]	\$	[	]	\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		]	]	\$	ĺ	]	<u>\$</u>
	Repayment of indebtedness	[	]	]	\$	[	]	\$
	Working capital	[	]	]	\$	[	]	\$
	Other (specify): Investment in Debello Investors LLC and Debello	_ [	X	]	\$499,850,000	[	]	<u>s</u>
	Trading Ltd.	_						
	Column Totals	_ [	x	]	\$499,850,000	[	]	\$
	Total Payments Listed (column totals added)	••			[X] <u>\$</u>	499,	850,0	00
	D. FEDERAL	SIGNAT	`UR	Œ				
igr	issuer has duly caused this notice to be signed by the undersigned duly at ature constitutes an undertaking by the issuer to furnish to the U.S. Security transfer of the state of the security of the issuer to any non-accredited investor pursuant to	ties and	Exc	han	ge Commission,			
รรบ	er (Print or Type)	Signatu	(e)	$\overline{\gamma}$	٦,/		D	ate
/e	xford Offshore Credit Opportunities Fund Limited	<i>"</i>	) ,	<u> </u>	* F			315/09
	ne of Signer (Print or Type)	Title of	Sig	ner	(Print or Type)			
Var					t and Assistant	C	otom	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

·	E. STATE SIGNATURE	Ì
1.,	Yes No Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	
	See Appendix, Column 5, for state response. Not applicable	

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D
  (17 CFR 239.500) at such times as required by state law. Not applicable
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. Not applicable
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied. Not applicable

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) Wexford Offshore Credit Opportunities Fund Limited	Signature M	Date 3 5 09			
Name (Print or Type)	Title (Print or Type)				
Arthur H. Amron	Vice President and Assistant Secretary				

## Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

**APPENDIX** 

WEXFORD OFFSHORE CREDIT OPPORTUNITIES FUND LIMITED									
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				5 Not Applicable Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Common Shares Par Value U.S. \$0.001 Per Share \$500,000,000	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL	<u> </u>				-				
AK							<u>-</u>		
AZ AR									
CA									
CO									
СТ		X	X	1	\$413,351	0	0	<u></u>	
DE					,		···		
DC		Х	X	1	\$500,000	0	0		
FL									
GA								-	
HI									
ID					-			,	
IL									
IN									
1A									
KS									
KY									
LA								_	
ME									
MA									
MD								<del></del>	
ΜI		!							
MN		Х	Х	1	\$1,000,000	0	0		
MS									
МО									<u> </u>
MT					<del> </del>			-	
NE									

# **APPENDIX**

Intend to sell to non-accredided investors in State (Part B-Item I)   Type of security and aggregate offering price offering in state (Part B-Item I)   Pert B-Item II   Pert B-Item II	WEXFORD OFFSHORE CREDIT OPPORTUNITIES FUND LIMITED									
Par Value   U.S. S00.000   Number of Per Share   S500.000,000   Number of Accredited Investors   No	1	Intend to sell to non-accredited investors in State		and aggregate offering price offered in state	4  Type of investor and amount purchased in State				5 Not Applicable Disqualification under State ULOE (if yes, attach explanation of waiver granted)	
ND NE		Yes	No	Par Value U.S. \$0.001 Per Share	Accredited	Amount	Non- Accredited	Amount	Yes	No
NE NH NJ NM NV NY X X X 8 S53,097,799 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	NC	ļ								<u> </u>
NH NJ NM NV NY X X X 8 S53,097,799 0 0 0 O O O O O O O O O O O O O O O O	ND									
NJ NM NV NY X X X 8 \$53,097,799 0 0 0 O O O O O O O O O O O O O O O O	,	ļ							<u> </u>	
NM		ļ						<del></del>		
NV									<u> </u>	
NY										
OH OK OK OR									<u> </u>	
OK OR			X	Х	8	\$53,097,799	0	0		
OR         PA           PA         PA           RI         PA           SC         PA           SD         PA           TN         PA           TX         PA           UT         PA           VA         PA           WA         PA           WI         X           X         X           1         S4,000,000           0         0		<u> </u>								
RI SC SD	<del></del>	<u> </u>								
RI SC SD										
SC         SD         SD<		ļ <u></u>	<u> </u>							-
SD         TN           TX            UT            VT            VA            WA            WV            WI         X         X           X         1         \$4,000,000         0           WY										
TN		1								
TX	;									
UT         VT         VA         VA<	<del></del>									
VT         VA         Image: Control of the control of										
VA         WA           WA         WV           WI         X         X         1         \$4,000,000         0         0           WY         WY         WY         0         0         0         0									<u> </u>	
WA         WV           WV         S4,000,000           WI         X           X         X           Y         0	<del></del>	<del>                                     </del>								
WV         Image: Control of the c	-	-								
WI X X 1 \$4,000,000 0 0 WY										
WY		<u> </u>	х	X	1	\$4,000.000	0	0		<del>                                     </del>
	<del>.</del>					+ -,,				
	PR							<u> </u>		

